

# Grading of Recommendations, Assessment, Development and Evaluation (GRADE): HEPLISAV-B

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#### **GRADE Process**

- Develop policy questions
- Consider critical outcomes
- Review and summarize evidence of benefits and harms
- Evaluate quality of evidence
- Assess population benefit
- Evaluate values and preferences
- Review health economic data
- Considerations for formulating recommendations
- ACIP recommendation and GRADE category

### Policy question: Should HEPLISAV-B vaccine be recommended for adults on a 2-dose schedule over 1 month?

Population	Adults ≥18 years of age					
Intervention	HEPLISAV-B administered in 2 doses over 1 month					
Comparison	Existing hepatitis B vaccines licensed for adults in the U.S.: IWINRIX, <b>Engerix-B</b> , Recombivax HB					
Outcomes	<ul> <li>Hepatitis Binfection</li> <li>Mild adverse events</li> <li>Serious adverse events</li> <li>Cardiovascular safety</li> </ul>					

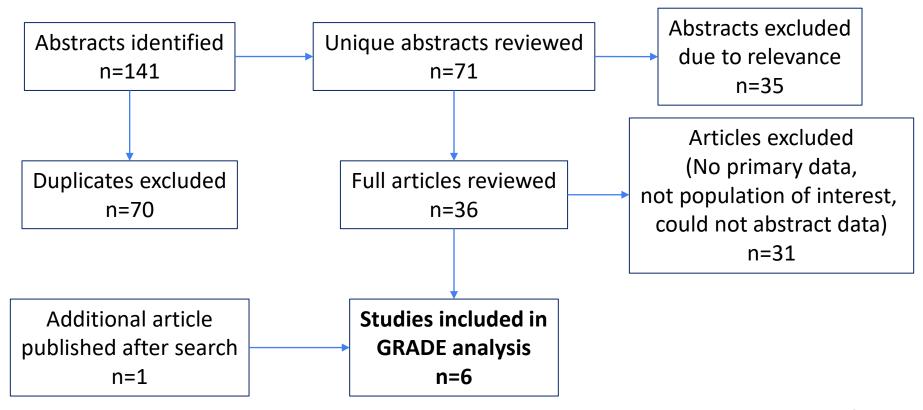
#### Outcome measures included in evidence profile

Outcome	Importance
Benefits	
1. Hepatitis Binfection	Critical
Harms	
2. Mild adverse events (any)	Important
3. Serious adverse events (any)	Critical
4. Cardiovascular adverse events (any)	Critical

#### **Evidence retrieval**

- Systematic review of Medline (OVID), CAB Abstracts, Embase, Global Health (OVID), Scopus, Cochrane
- Search terms included: "HEPLISAV" or "HBV-ISS" or "HBsAg-1018" or "1018 immunostimulatory sequence" or "hepatitis B surface antigen-1018 ISS"
- Articles were included if they presented immunogenicity or disease endpoints or safety data on HEPLISAV
- Articles were excluded if:
  - Non-human primates, basic science
  - Secondary data analyses
  - Immunogenicity outcomes for non-licensed formulation or use of HEPLISAV
  - General review or opinion perspectives or unable to abstract data

#### **Evidence retrieval**



### **Evidence types for GRADE**

Initial evidence type	Study design
1	Randomized controlled trials (RCTs), or overwhelming evidence from observational studies
2	RCTs with important limitations, or exceptionally strong evidence from observational studies
3	Observational studies, or RCTs with notable limitations
4	Clinical experience and observations, observational studies with important limitations, or RCTs with several major limitations

# **GRADE of evidence for HEPLISAV-B: Benefits**

### Outcome #1: Hepatitis B infection Characteristics of included studies

Study	Type	Population	Intervention	Comparison	Main Outcomes*	Funding	Site
Halperin, 2006 <i>Vaccine</i>	RCT, phase II	99 healthy adults, 18-28 years	HEPLISAV at 0 and 8 weeks	Engerix-B at 0, 8, and 24 weeks	Seroprotection rate (anti-HBs > 10mIU/mL)**	Dynavax	2 centers in Canada
Halperin, 2012 <i>Vaccine</i>	RCT, Phase III	2415 healthy adults, 18-55 years	HEPLISAV at 0 and 4 weeks	Engerix-B at 0, 4, and 24 weeks	Seroprotection rate (anti-HBs ≥ 10mIU/mL)**	Dynavax	Canada and Germany
Heyward, 2013 <i>Vaccine</i>	RCT Phase III	2452 healthy adults, 40-70 years	HEPLISAV at 0 and 4 weeks	Engerix-B at 0, 4, and 24 weeks	Seroprotection rate (anti-HBs ≥ 10mIU/mL)**	Dynavax	29 sites in US, 3 in Canada
Jackson, 2017 <i>Vaccine</i>	RCT Phase III	8374 adults, 18-70 years, excluding HIV and history of autoimmune disease	HEPLISAV at 0 and 4 weeks	Engerix-B at 0, 4, and 24 weeks	Seroprotection rate (anti-HBs ≥ 10m IU/mL)**	Dynavax	USA

<sup>\*</sup> No studies included disease endpoints

<sup>\*\*</sup> Seroprotection rate after receiving complete vaccine series

### Outcome #1: Hepatitis B infection Seroprotection rate (SPR), estimates of effect

Outcome*	No. of subjects (# studies)	SPRin HEPLISAV	SPRin Comparison	Difference in SPRs	NNV
Seroprotection rate at 24 weeks in adults 18-28 years	48 in HEPLISAV; 51 in Engerix-B (1)	100%	90.2%	9.8%	10
Seroprotection rate at 28 weeks in adults 18-55 years	1511 in HEPLISAV; 521 in Engerix-B(1)	97.9% (97.9–98.7)	81.1% (77.7-84.4)	16.8% (14.3–20.2)	6
Seroprotection rate at 28 weeks in adults 40-70 years	1121 in HEPLISAV; 353 in Engerix-B(1)	90.0% (88.2–91.8)	70.5 (65.5–75.2)	19.5% (14.7–24.7)	5
Seroprotection rate at 28 weeks in adults 18-70 years, excluding HIV and autoimmune	4376 in HEPLISAV; 2289 in Engerix-B(1)	95.4% (94.8–96.0)	81.3% (79.6–82.8)	14.2% (12.5–15.9)	7

<sup>\*</sup> All studies considered seroprotection as anti-HBs > 10mIU/mL

# Outcome #1: Hepatitis B infection Type of evidence

Outcome	Design (# of studies)	Initial evidence level	Risk of Bias	Inconsistency	Indirectness	Imprecision	Other Considerations	Evidence Type
Hepatitis B infection	RCT, Phase II (1)	1	No serious	No serious	Serious (-1) <sup>a,b</sup>	No serious	Yes <sup>c</sup>	2
Hepatitis B infection	RCT, Phase III (3)	1	No serious	No serious	Serious (-1) <sup>a</sup>	No serious	Yes <sup>c</sup>	2

- a. There were no studies that looked at hepatitis B infection as outcome; anti-HBs response was used as a surrogate
- b. Intervention was HEPLISAV series at 0 and 8 weeks, which is not the licensed series
- c. All studies funded by Dynavax Technologies Corporation

# **GRADE of evidence for HEPLISAV-B: Harms**

### Outcomes #2, 3, 4: Adverse events Characteristics of included studies

Study	Туре	Population	Intervention	Comparison	Main Outcomes*	Funding	Site
Halperin, 2006, <i>Vaccine</i>	RCT Phase II	99 healthy adults, 18–28 years	HEPLISAV at 0 and 8 weeks	Engerix-B at 0, 8, and 24 weeks	Any mild adverse events (local, systemic), SAE	Dynavax	2 sites in Canada
Halperin, 2012, Vaccine	RCT Phase III	2415 healthy adults, 18–55 years	HEPLISAV at 0 and 4 weeks	Engerix-B at 0, 4, and 24 weeks	Any mild adverse events (local, systemic), SAE (related not reported)	Dynavax	Canada, Germany
Sablan, 2012, Vaccine	RCT Phase III	412 healthy adults, 40–70 years	HEPLISAV at 0, 8, and 24 weeks (placebo at week 4)	Engerix-B at 0, 4, and 24 weeks (placebo at week 8)	Any mild adverse events (local, systemic), SAE	Dynavax	5 sites in Korea, 2 sites in Philippines, and 1 site in Singapore
Heyward, 2013, <i>Vaccine</i>	RCT Phase III	2452 healthy adults, 40–70 years	HEPLISAV at 0 and 4 weeks	Engerix-B at 0, 4, and 24 weeks	Any mild adverse events (local, systemic), SAE, cardiovascular events	Dynavax	29 sites in US, 3 sites in Canada

# Outcomes #2, 3, 4: Adverse events Characteristics of included studies, continued

Study	Type	Population	Intervention	Comparison	Main Outcomes*	Funding	Site
Janssen, 2013, Vaccine	RCT Phase III	521 adults with chronic kidney disease, 18– 75 years	HEPLISAV at 0, 4, and 24 weeks	Engerix-B at 0, 4, 8, and 24 weeks	Any adverse events, SAE, cardiovascular events	Dynavax	46 sites in US, 3 sites in Canada, 9 sites in Germany
HBV 23	RCT Phase III	8368 adults, 18–70 years, excluding HIV and history of autoimmune disease	HEPLISAV at 0 and 4 weeks	Engerix-B at 0, 4, and 24 weeks	Any mild adverse events, SAE (related not reported), cardiovascular events	Dynavax	US

## Outcome #2: Mild adverse events Estimates of effect

Outcome	No. of subjects (# studies)	No. reported in HEPLISAV (%)	No. reported in Comparison (%)	Difference
Any mild adverse events	14256 (6)	4497 (45.6%)	2003 (45.7%)	-0.1%
Injection-site reaction	5888 (5)	1519 (35.5%)	494 (30.8%)	4.6%
Systemic reaction	5888 (5)	1205 (28.1%)	483 (30.1%)	-2.0%

## Outcome #3: Serious adverse events (SAE) Estimates of effect

Outcome	No. of subjects (# studies)	No. reported in HEPLISAV (%)	No. reported in Comparison (%)	Difference
Any SAE	14256 (6)	529 (5.4%)	276 (6.3%)	-0.9%
SAE considered related to vaccine*	3473 (4)	1 (0.04%)	1 (0.10%)	-0.06%

<sup>\*1</sup> related SAE in HEPLISAV was progression of chronic kidney disease stage IV to end-stage renal disease 28 days after receiving dose 1.

<sup>\*1</sup> related SAE in Engerix-B was reactive airway disease due to Churg-Strauss syndrome (ANCA+ vasculitis) 42 days after receiving dose 3.

### Outcome #4: Cardiovascular adverse events Estimates of effect

Outcome	No. of subjects (# studies)	No. reported in HEPLISAV (%)	No. reported in Comparison (%)	Difference
Cardiovascular adverse event	11333 (3)	21 (0.27%)*	5 (0.14%)	0.13%

<sup>\*</sup>All subjects with cardiovascular adverse event reported more than 1 cardiovascular disease risk factor

### Outcomes #2, 3, 4: Adverse events Type of evidence

Outcome	Design (# of studies)	Initial evidence level	Risk of Bias	Inconsistency	Indirectness	Imprecision	Other Considerations	Evidence Type
Mild adverse events	RCT(6)	1	No serious	No serious	No Serious	No serious	Yes*	1
Serious adverse events	RCT(6)	1	No serious	No serious	No Serious	No serious	Yes*	1
Cardiovascular adverse events	RCT(3)	1	No serious	No serious	No Serious	No serious	Yes*	1

<sup>\*</sup>All studies funded by Dynavax Technologies Corporation;

<sup>\*</sup>Adverse events from HBV23 is unpublished

### **GRADE Summary**

### Outcomes #1,2, 3, 4: Adverse events Characteristics of excluded studies

Study	Туре	Population	Intervention	Comparison	Main Outcomes*	Funding	Site
<sup>a</sup> Halperin, 2012, <i>Vaccine</i>	Obs	41 healthy adults, 18–39 years	HEPLISAV at 0 and 4 or 8 weeks	None	SPR, any adverse events, SAE	Dynavax	1 site in Canada
bHalperin, 2013, Human Vaccines & Immunotherap eutics	RCT	Healthy adults, 18–65 years who did not respond to 3 doses (N=35) or 4-6 doses (N=24) of licensed HBV vaccine	HEPLISAV 1 dose followed by 2 additional Engerix-B doses	Engerix-B followed by up to 2 additional Engerix-B doses	SPR, any adverse events, SAE	Dynavax	2 sites in Canada
<sup>c</sup> Janssen, 2015, <i>Vaccine</i>	Subgroup analysis	328 adults with chronic kidney disease	HEPLISAV at 0, 4, and 24 weeks	Engerix-B at 0, 4, 8, and 24 weeks, double doses	SPR, any adverse events, SAE	Dynavax	US, Canada, Germany

a. Unable to abstract data since safety data presented in Figure only and non control/placebo

b. Unable to abstract safety data from the way data presented in Table 4; recipients only received 1 dose of HEPLISAV

c. Subgroup analysis of data from Janssen. 2013. Vaccine, already included data in estimates of effect

#### **Limitations**

- All data are from same funding source (Dynavax Technologies Corporation)
- Generalizability
  - 21% of patients in 3 of 6 studies were not in the United States
    - 18% of patients in 2 studies from Canada and Germany, which may be similar populations to U.S.
    - 3% of patients in 1 study from Korea, Philippines, Singapore
- All data from clinical trials, no real world data
- No disease endpoints
- Cardiovascular events were not reported in all studies
- No long term data published on immunogenicity and adverse events

#### **GRADE SUMMARY**

Compared to licensed hepatitis B vaccine (Engerix-B)

Outcome	Design (# of studies)	Findings	Evidence type	Overall evidence type	
BENEFITS					
Hepatitis B infection	RCT (4)	HEPLISAV non-inferior seroprotection rate	2	2	
HARMS					
Mild adverse events RCT (6)		No differences detected between vaccinated and comparison populations for mild adverse events HEPLISAV had 4.6% more local injection site reactions	1	1	
Serious adverse events RCT (6)		No differences detected between vaccinated and comparison populations for serious adverse events	1		
Cardiovascular adverse events	RCT* (1) RCT** (2)	More events in HEPLISAV group, but not statistically significant	1		

<sup>\*</sup>Not yet published, data abstracted from HEPLISAV package insert; \*\*Data abstracted from studies that stated most were cardiac deaths not related to va@@ne

### **Future considerations**

### **Information gaps**

- Indirectness since no study looking at hepatitis B infection as outcome
- No real world cohort data
- Long term protective immunity unknown
- Cost-effectiveness analysis\*
  - 1 industry funded study showed HEPLISAV ICER < \$25,000 compared to Engerix-B for diabetic patients, patients with chronic kidney disease, patients with ESRD, healthcare workers, and travelers
  - Other populations needed
- Post licensure studies will be included in future workgroup considerations

<sup>\*</sup>Kuan 2013 Vaccine

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For more information, contact CDC 1-800-CDC-INFO (232-4636) TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

